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TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(s))			Docket No. DP-306553/DE3-0256	
In Re Application Of: Diane M. Landers, et al.				
Serial No. 10/002,678	Filing Date October 24, 2001	Examiner	Group Art Unit 2812	
Title: HORIZONTALLY STRUCTURED MANUFACTURING PROCESS MODELING FOR FIXTURES AND TOOLING				
<p style="text-align: center;">Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p style="text-align: center;">37 CFR 1.97(b)</p> <p>1. <input checked="" type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.</p> <p style="text-align: center;">37 CFR 1.97(c)</p> <p>2. <input type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:</p> <p style="padding-left: 40px;"><input type="checkbox"/> the statement specified in 37 CFR 1.97(e);</p> <p style="text-align: center;">OR</p> <p style="padding-left: 40px;"><input type="checkbox"/> the fee set forth in 37 CFR 1.17(p).</p>				

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**HORIZONTALLY STRUCTURED MANUFACTURING PROCESS MODELING FOR FIXTURES
AND TOOLING**

Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of _____ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 06-1130
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- ☐ Charge the amount of _____
- ☐ Credit any overpayment.
- ☒ Charge any additional fee required.

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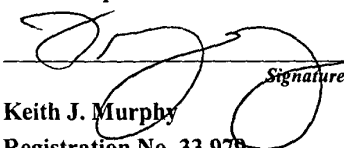
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Dated: August 26, 2003

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